

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY
(Includes Reference to PCT International Applications)ATTORNEY'S DOCKET NUMBER
SCH 1743

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought of the invention entitled,

PROCESS FOR THE PRODUCTION OF B-GOSTEROL AND ITS INTERMEDIATE PRODUCTS USING RECOMBINANT YEASTS

the specification of which (check only one item below):

☐ is attached hereto☐ was filed as United States application

Serial No. _____

on _____

and was amended

on _____ (if applicable)

☒ was filed as PCT international applicationNumber PCT/EP98/06134 on 24 September 1998

and was amended under PCT Article 19

on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim priority benefits under Title 35, United States Code, §119 of the following United States Provisional Application and of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL AND FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
Germany	197 44 212.9	30 September 1997	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

Combined Declaration For Patent Application and Power of Attorney (Continued)				ATTORNEY'S DOCKET NUMBER SCH 1743	
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
U.S. APPLICATION NUMBER		U.S. FILING DATE		PATENTED	PENDING
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
<p>16 POWER OF ATTORNEY: As a named inventor, I hereby appoint William Millen (19,544), John L. White (17,746), Anthony J. Zelano (27,969), Alan E. J. Branigan (20,565), John R. Moses (24,983), Harry B. Shubin (32,004), Brian P. Heaney (32,542), Richard J. Traverso (30,595), John A. Sopp (33,103), Richard M. Lebowitz (37,067), John H. Thomas (33,460), Catherine M. Joyce (40,668), James T. Moore (35,619), James E. Ruland (32,432), Nancy Axelrod (44,014) and Jennifer J. Branigan (40,921) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.</p>					
Send correspondence to: MILLLEN, WHITE, ZELANO & BRANIGAN, P.C. Arlington Courthouse, Plaza I, Suite 1400 2200 Clarendon Boulevard Arlington, Virginia 22201			Telephone No. 703/243-6333		Direct Telephone Calls to:
FULL NAME OF INVENTOR		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
20 WEBER		WEBER	Alfred		
0 RESIDENCE & CITIZENSHIP		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
1 Berlin		Berlin	Germany DEX	Germany	
POST OFFICE ADDRESS		STREET	CITY	STATE & ZIP CODE/COUNTRY	
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20 FULL NAME OF INVENTOR		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0 KLAGES		KLAGES	Uwe		
2 RESIDENCE & CITIZENSHIP		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
2 Berlin		Berlin	Germany DEX	Germany	
POST OFFICE ADDRESS		STREET	CITY	STATE & ZIP CODE/COUNTRY	
		Schramberger Strasse 19	Berlin	D-13467 Germany	
20 FULL NAME OF INVENTOR		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0 KENNECKE		KENNECKE	Mario		
3 RESIDENCE & CITIZENSHIP		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
3 Berlin		Berlin	Germany DEX	Germany	
POST OFFICE ADDRESS		STREET	CITY	STATE & ZIP CODE/COUNTRY	
		Taubertstrasse 31f	Berlin	D-14193 Germany	
20 FULL NAME OF INVENTOR		FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0 LANG		LANG	Christine		
4 RESIDENCE & CITIZENSHIP		CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
4 Berlin		Berlin	Germany DEX	Germany	
POST OFFICE ADDRESS		STREET	CITY	STATE & ZIP CODE/COUNTRY	
		Goethestrasse 59	Berlin	D-10625 Germany	

Combined Declaration for Patent Application and Power of Attorney (Continued)
 (Includes Reference to PCT International Applications)

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5 0 5	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
		STAHL	Ulf	
		Berlin	Germany DEX	Germany
		Muhlenfeldstrasse 115	Berlin	D-13467 Germany
6 0 6	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
		POIAKOWSKI	Thomas	
		Berlin	Germany DEX	Germany
		Egelstrasse 2	Berlin	D-13507 Germany
2 0 7	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
3 0 8	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
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	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	DATE	SIGNATURE OF INVENTOR 207	DATE
<i>[Signature]</i>	16/03/00		
SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204	DATE	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205	DATE	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206	DATE	SIGNATURE OF INVENTOR 212	DATE

Combined Declaration for Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NUMBER SCH 1743	
20	FULL NAME OF INVENTOR	FAMILY NAME <u>STAHL</u>	FIRST GIVEN NAME Ulf	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Berlin	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	STREET Muhlenfeldstrasse 115	CITY Berlin	STATE & ZIP CODE/COUNTRY D-13467 Germany	
21	FULL NAME OF INVENTOR	FAMILY NAME <u>POLAKOWSKI</u>	FIRST GIVEN NAME Thomas	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY Berlin	STATE OR FOREIGN COUNTRY Germany	COUNTRY OF CITIZENSHIP Germany	
	POST OFFICE ADDRESS	STREET Egelstrasse 2	CITY Berlin	STATE & ZIP CODE/COUNTRY D-13507 Germany	
22	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
23	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
24	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
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SIGNATURE OF INVENTOR 201		DATE	SIGNATURE OF INVENTOR 207		DATE
SIGNATURE OF INVENTOR 202		DATE 22.03.2000	SIGNATURE OF INVENTOR 208		DATE
SIGNATURE OF INVENTOR 203		DATE 23.03.2000	SIGNATURE OF INVENTOR 209		DATE
SIGNATURE OF INVENTOR 204		DATE	SIGNATURE OF INVENTOR 210		DATE
SIGNATURE OF INVENTOR 205		DATE	SIGNATURE OF INVENTOR 211		DATE
SIGNATURE OF INVENTOR 206		DATE	SIGNATURE OF INVENTOR 212		DATE

Combined Declaration for Patent Application and Power of Attorney (Continued)
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205	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
		STAHL	Ulf	
		Berlin	Germany	Germany Austria
		Muhlenfeldstrasse 115	Berlin	D-13467 Germany
206	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
		POLAKOWSKI	Thomas	
		Berlin	Germany	Germany
		Egelssstrasse 2	Berlin	D-13507 Germany
207	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
208	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
209	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR 202	DATE	SIGNATURE OF INVENTOR 208	DATE
SIGNATURE OF INVENTOR 203	DATE	SIGNATURE OF INVENTOR 209	DATE
SIGNATURE OF INVENTOR 204 <i>Charles Ray</i>	DATE 28.3.00	SIGNATURE OF INVENTOR 210	DATE
SIGNATURE OF INVENTOR 205 <i>Thomas</i>	DATE 28.3.00	SIGNATURE OF INVENTOR 211	DATE
SIGNATURE OF INVENTOR 206 <i>Th. Polak</i>	DATE 25.3.00	SIGNATURE OF INVENTOR 212	DATE